

SENATE BILL REPORT

SSB 6445

As Passed Senate, February 16, 2016

Title: An act relating to clarifying the role of physician assistants in the delivery of mental health services.

Brief Description: Clarifying the role of physician assistants in the delivery of mental health services.

Sponsors: Senate Committee on Health Care (originally sponsored by Senators Braun and Angel).

Brief History:

Committee Activity: Health Care: 1/28/16, 2/04/16 [DPS].

Passed Senate: 2/16/16, 49-0.

SENATE COMMITTEE ON HEALTH CARE

Majority Report: That Substitute Senate Bill No. 6445 be substituted therefor, and the substitute bill do pass.

Signed by Senators Becker, Chair; Dammeier, Vice Chair; Cleveland, Ranking Minority Member; Angel, Bailey, Baumgartner, Brown, Conway, Frockt, Keiser, Parlette and Rivers.

Staff: Kathleen Buchli (786-7488)

Background: A physician assistant is a person who is licensed to practice medicine to a limited extent under the supervision of a physician and who is academically and clinically prepared to provide health care services and perform diagnostic, therapeutic, preventative, and health maintenance services.

The Department of Social and Health Services has adopted rules on the provision of behavioral health services and the provision of psychiatric medication services. The rules describe which health care professionals may have medical direction and responsibility, who may enter clinical notes, which health care professionals may be contracted with, and who may determine medication schedules. These rules do not currently specify physician assistants among the health care professionals who are able to perform such duties.

Summary of Bill: Both physician assistants and osteopathic physician assistants may provide services that they are competent to perform based on their education, training, and

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experience and that are consistent with their delegation agreement that is filed with the Medical Quality Assurance Commission (MQAC). Physician assistants may not practice beyond the scope of their supervising physician's own scope of expertise and practice, they may practice in mental health settings as provided in their delegation agreement.

Physician assistants are added throughout the mental health code alongside references to psychiatrists, physicians, and psychiatric advanced registered nurse practitioners. A physician assistant is able to sign a petition for involuntary detention of a patient if his or her supervising physician is able to review the petition before it is filed.

Appropriation: None.

Fiscal Note: Not requested.

Committee/Commission/Task Force Created: No.

Effective Date: Ninety days after adjournment of session in which bill is passed.

Staff Summary of Public Testimony on Original Bill: PRO: This clarifies the existing authority that physician assistant's have under the law. Physician assistants are not listed in the mental health law but have the training and experience to work in these settings. The bill is consistent with their scope of practice and their work with their supervising psychiatrist. We suggest that the bill be revised to include physician assistants throughout mental health law to call out them where physicians and advanced registered nurse practitioners are mentioned. This will stop confusion in practice. We support the full employment of physician assistants and allowing them to practice to the full extent of their license. It should not be spelled out in the bill how often the physician assistant spends with their supervising physician; this is governed by the practice agreement. Physician assistants work in psychiatry in all other states. We have a mental health crisis and we are integrating behavioral health into physical health; we need more practitioners to make this possible. We need to ease the burden of getting people trained and we need to allow them to work at the top of their profession.

CON: This opens the door to having inexperienced individuals signing commitment petitions and interfering with patient's liberty. We are concerned that the supervising physician won't meet the patient. There is no requirement for minimal psychiatric training. It should be required that the supervising physician also see the individual subject to the petition and minimum training standards should be stated.

Persons Testifying on Original Bill: PRO: Senator Braun, prime sponsor; Len Mc Comb, Washington State Hospital Association; Suzan Dula; Kate White Tudor, Washington Academy of Physician Assistants; Katie Kolan, Washington State Medical Association.

CON: Seth Dawson, National Alliance on Mental Illness, NAMI Washington; Mike De Felice, Department of Public Defense King County, Washington Defender Assoc, Wa Assoc of Criminal Defense Attys.

Persons Signed In To Testify But Not Testifying on Original Bill: No one.